PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax

re as or

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				ANI ITEOSODUCAL IN	mailing can only be used is certificate cannol be used	for any other economics
2 56 46	Mena trans		pag	COLUMN BOX DO CONTROLS	I paper, such as an assignment of mailing or transmission	cent or formal drawing t
KENYON & I ONE BROADW NEW YORK, N	CENYON LLP /AY	0/2007	1 to Sta add trae	ercby certify that the tes Postal Service was ressed to the Mail	tificate of Mailing or Trau is Fec(s) Transmittal is bei vith sufficient postage for it Stop ISSUE FEE addres TO (\$71) 273-2885, on the	ng deposited with the United class mail in an enve
					HA RAMOS	(Depositor's ne
					1. Romas	(Signat
<u> </u>			L_		12/31/0	7
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/519,600 09/16/2005			Uwe Guenther		10191/4126	9491
APPLN. TYPE	SMALL ENTITY	ISSUE PEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUI	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	02/29/2008
EXAM	NER	ART UNIT	CLASS-SUBCLASS		31,740	02/29/2008
WILLIAMS, HOWARD L		2819	341-100000			
	nce address or indication		2. For printing on the pr	tout finat Het		····
☐ Change of correspondence address (or Change of Corresponder Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 63-02. or more recent) attached. Use of a Custom Number is required.			(1) the names of up to 3 registered patent attorneys or agents GR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
ASSIGNEE NAME AN	D RESIDENCE DATA	TO BE PRINTED ON T	HE PATENT (print or type)		
resordation as set forth	in 37 CFR 3.11. Compl	etion of this form is NOT	tata will appear on the pai a substitute for filing an ar	ent. If an assignee signment.	is identified below, the de	ocument has been filed i
(A) NAME OF ASSIGNEE		ı	(B) RESIDENCE: (CITY	and STATE OR CO	UNTRY)	
Robert Bosch GMBH			tuttgart, Federa	l Republic o	of Germany	
ase check the appropria	te assignee category or e	ategories (will not be prin	nted on the patent): 🔲 i	ndividual 🕭 Corp	oration or other private gro	up entity 🔲 Governme
The following fee(s) are submitted:			Payment of Fee(s): (Please	first reapply any	previously paid issue fee s	bown above)
Issue Fec Publication Fee (No small entity discount permitted)			A check is enclosed.			
Advance Order - # of Copies			Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number11-0600(enclose an extra copy of this form).			
hange in Entity Statu	s (from status indicated a	ibove)	by the parties of the	- POODMIC PORTECT	CIRCOSC AD	extra copy of this torm).
	SMALL ENTITY status.		☐ b. Applicant is no longer	r claiming SMALL	ENTITY status. See 37 CF	R 1.27(g)(2),
TE: The Issue Fee and I rest as shown by the rec	Publication Fee (if required states	red) will not be accepted its Patent and Trademark O	from anyone other than the office.	applicant; a register	red attorney or agent; or the	assignee or other party i
Authorized Signature			7_	Date	131107	
yped or printed name_	Gerard A. Mes	· - · · · · · · · · · · · · · · · · · · 		Registration No.	35,952	
collection of informati	on is required by 37 CFF	1.311. The information i	is required to obtain or reta	in a benefit by the t	public which is to file (and lutes to complete, including tents on the amount of time demark Office, U.S. Depart END TO: Commissioner for	w the LISPTO to process

Un red to respond to a collection of information unless it displays a valid OMB control number.